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7590 04/19/2005

Paul A. Leipold
 Patent Legal Staff
 Eastman Kodak Company
 343 State Street
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June P. Carfagna (Depositor's name)
June P. Carfagna (Signature)
July 11, 2005 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/721,123	11/25/2003	Andrew D. Arnold	86811AJA	6175

TITLE OF INVENTION: OLED DISPLAY WITH AGING COMPENSATION | 07/14/2005 RMEBRAH1 00000071 10721123

01 FC:1501 1400.00 OP
 02 FC:1504 300.00 OP

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	07/19/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
DINH, TRINH VO	2821	315-169300

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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1 *Andrew J. Anderson*
 2 _____
 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

EASTMAN KODAK COMPANY

343 STATE STREET, ROCHESTER, NY 14650-2201

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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Authorized Signature *Paul A. Leipold /pc*

Date *7-11-05*

Typed or printed name *Paul A. Leipold*

Registration No. *26,664*

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